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CONFIRMATION NO. 4070

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**APPLICANTS**  
 Nils Griebenow, Dormagen, GERMANY;  
 Timo Flessner, Wuppertal, GERMANY;  
 Michael Harter, Leverkusen, GERMANY;  
 Martin Raabe, Ulm, GERMANY;  
 Anja Buchmuller, Essen, GERMANY;  
 Hilmar Bischoff, Wuppertal, GERMANY;  
 Peter Ellinghaus, Wuppertal, GERMANY;  
 Peter Kolkhof, Wuppertal, GERMANY;

**\*\* CONTINUING DATA \*\*\*\*\***  
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**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
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**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
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Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>	<b>INDEPENDENT CLAIMS</b>
35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		GERMANY	0	14	2
Verified and /KORTNEY L KLINKEL/	Initials				
Acknowledged	Examiner's Signature				

**ADDRESS**  
 Bayer Health Care LLC  
 400 Morgan Lane  
 West Haven, CT 06516  
 UNITED STATES

**TITLE**  
 Tetrahydrobenzo(D)Azepin-2-One Derivatives and the Use Thereof for Treating Cardiovascular Diseases

<b>FILING FEE RECEIVED</b> 1390	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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